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A

Medical dissertation

on

Dysentery

by

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Of Dysentery.

The prevalence of Dysentery, the devastation produced by it, and the cause of humanity render an investigation of it a duty incumbent on every medical man, but more especially on those, who practice in armies and fleets, where the disease generally presents itself in its most aggravated form, and often produces greater havoc among the men than the sword.

By a perusal of military history, we shall perceive, that by the great number of lives sacrificed by this disease, many well concerted plans of armies have been entirely defeated. To recount occurrences of this kind, I deem improper here, as it would carry me farther than a dissertation of this sort admits. I shall therefore proceed to describe the disease.

Dysentery for the most part comes on by cold shiverings with a small frequent pulse, and other symptoms of pyrexia, as lassitude, disordered stomach, loss

of appetite, and sometimes vomiting. These symptoms, though not always mentioned, or even taken notice of by the patients, are generally found upon examination, to have been in a greater, or less degree, the precursors of the disease. – To the above symptoms, succeed flatulence and uneasiness in the bowels, with severe griping pains and an almost incessant propensity to go to stool; when this is indulged in, little is voided. The pains in some persons, shift from place to place, and come on at intervals, while in others, they are fixed in some particular part of the belly, and others again complain only of a pain about the lower part of the pelvis, with a constant tenesmus.

The matter discharged during the continuance of the disease, is various; it generally consists of mucus and blood. The mucus is often only streaked with blood, but sometimes the blood is in much greater quantity, and even blood alone is sometimes discharged; on other occasions the discharges consist of mucus only; in this case, the disease is called Dysenteria Alba, or Morbus

Mucosus. There is also sometimes mixed with the mucus, a matter discharged, a membranous substance, which is owing to coagulable lymph, produced by an abrasion of the internal coats of the intestines. There are other substances which are not so often seen in the stools, viz round worms, and some small white bodies resembling suet.

During the existence of the above symptoms, the faces seldom, or never appear, unless, they are carried off by a cathartic, and then they are in lumps so indurated and rounded, that they appear to have been formed in the cells of the colon at the beginning of the disease. The discharge of these hardened faces, or scybila, as they are called, is almost always attended by a remission of all the symptoms, and more especially of the tormina and tenesmus. Those substances mentioned as resembling suet, have been taken notice of by ancient as well as modern writers, under the name of corpora pinqua. Drs Huck and Pringle attended a patient, labouring under dysentery, who passed substances of this kind, one of which they

preserved, and on examining it, were satisfied that the substance in question was a bit of cheese, though their patient assured them that he had not eaten any cheese from the commencement of his disease, which had been more than a fortnight. They were at a loss how to account for it, whether it had been collected from small particles which passed from the stomach in an indigested state, before the patient was taken ill, or whether it was formed from the milk which he had used during his illness; but they both appear to have been convinced that this substance was of the same nature of all the corpora fingua which are met with in dysentery. Dr. Moseley of the West-Indies, says Pringle erred in supposing these substances to be cheese. Besides the above, Pringle notices a watery humour which is discharged with slime, and may be one cause of irritation; and descends from the higher parts of the intestines, while the mucus is mostly discharged from the rectum in straining.

Sometimes the beginning of dysentery will have

The appearance of bilious fever for the patient will have a fever attended by disorders stomachy, several days before the discharge from the bowels takes place. On other occasions, from exposure to cold and undue fatigue, during the season in which dysentery prevails, persons will be suddenly attacked by the bilious symptoms, but seldom either some degree of fever.

There are few diseases in which the resources of nature to effect relief are attended with as little success as in dysentery. It is seldom the mildest cases where there is little fever that she is successful in curing or in ameliorating the disease.

The disease is generally contracted slowly if the fever is of a violent character it may be seen attended to at its commencement, or if the endeavors to avert it, prove abortive the existence of the attack is terminated in in the course of a few days, and the life of the patient is sacrificed in a few days, perhaps even in a longer continuation of health which, an intermittent relapse of some one predisposition, inventory-

stools restless with a hoarse cough petechiæ and delirium. This last symptom is not always present. The stools which were at a similar stage were often the bowels begin to moisten, and a sudden and most offensive odour.

Simple or treatment of dysentery in the camp, medicines a long time do good which is said in the most part brought in by neglecting the use at the beginning, and in some cases to cause use other astringents liquid enemata, and in some the gut sometimes accompanied the pain which in the opinion, in medicine in, has been [illegible] and in fatal cases, "the most fatal [illegible] of disease in the hospital, and distinguishing which are all most [illegible] and [illegible] and [illegible]."

There exists a great contrast of opinion with regard to the causes of dysentery. Some [illegible] that the disease is produced by contagion, others, on the contrary, it depends upon a vitiated state of the air and is increased in the [illegible] that [illegible] to [illegible]

nal fevers, while others again ascribe it to certain kinds of food taken into the stomach. Cullen says the disease does often arise from the application of cold but the disease is always contagious and in the propagation of such contagion it becomes epidemic in camps and other places. Pringle is of opinion that this disease, like autumnal intermittent and remittent fevers, is brought on by the heat and moisture of the atmosphere, and that the cause is the more, or less prevalent in proportion to the heat and closeness of the atmosphere, as well as to the quantity of vapour with which it is impregnated. But he does not however extend this opinion to the exclusion of contagion; for in speaking of the diseases of the camp, he says "The contagion passes from one who is ill, to his companions in the same tent, and from thence to the next. But the greatest source of infection seems to be the privies, after they have received the dysenteric excrements of those who first fall ill."

That dysentery whenever it prevails as an

epidemic is always produced, and vicissitudes of the atmosphere, which predispose, give rise to autumnal intermittent and remittent fevers, I believe there does remain scarcely a doubt. Hence, it generally occurs in warm climates in summer and autumn, when the perspiration, which is in great excess during the day, is broken by the coldness and dampness of the night. The disease is sometimes brought on by some kinds of food taken into the stomach, which in consequence of its acrid and indigestible matter excites morbid secretions in that organ; these together with an increased secretion and vitiated state of the bile produce a simple diarrhoea, which carries off the mucus of the intestines which in a healthy state defends them from irritation. Their coats are at length broken and severe griping pains with bloody stools. But these cases are to be distinguished from the epidemical disease, which I believe is always brought on by obstructed perspiration. – The skin being the great outlet of perspiration, it is evident that vicissitudes of the

air, must subject the quantity of this to great variation. Dr. Moseley says, "The consequence of obstructed respiration from whatever cause, is great inflammation, a great debility and plethora in the body." But by what eminent cause this plethora is directed to the intestines, he does not know. It is sufficiently evident, that in consequence of this obstruction and the torpor of the extreme vessels on the surface, the equilibrium of the circulation is destroyed, and the blood directed to the interior; by which the plethora of the Coliac and mesenteric circles is greatly increased, and the symptoms of fever succeed. The inspiration being checked, the mesenteric vessels which are in a state of distention, throw out minus the serid serum upon the internal surface of the intestines. If the plethora be great, blood will be thrown out from those vessels, and inflammation and ulceration may ensue. At this time there is a spasm of the circular fibres of the colon which retains the hardened faces in it. The retention of

these indurated fæces must greatly increase the irritation, and consequently the tenesmus.

Here nature sometimes, though rarely, relieves herself by a discharge of blood from the distended vessels, without occasioning much organic derangement; but most generally in her efforts to restore the economy to its healthy and natural state, she hastens the mortal termination of the disease or renders the symptoms worse.

I believe it will not be doubted, that the stomach, & the sympathy which exists between it and the surface of the body, is primarily affected in consequence of the obstruction of the liver.

Upon the dissection of the bodies of patients who die of dysentery, the coats of the large intestines are found thickened, ulcerated and often abraded, particularly those of the colon and rectum, which are also found mortified with a part of the cæcum. Adhesions are sometimes formed, and the peristaltic separation is in some cases deranged. The lower part of the ileum frequently

bears the marks of preceding inflammation, but the small intestines seldom have a morbid appearance. Other viscera of the abdomen appear to have suffered by the disease, but the colon and rectum are the greatest sufferers in dysentery.

From what has been said, it is obvious that dysentery may be considered an inflammatory affection of the lower intestines, and if the views which have been taken of the pathology of this disease be correct, it is sufficiently evident that the indications of cure, are to remove inflammation with the consequent spasm, to evacuate the bowels, and to restore the perspiration.

For the removal of inflammation blood-letting, should be resorted to, and the operation repeated as often as it is rendered necessary by the plethoric habit of the patient, or by the violence of the febrile symptoms. By this remedy the spasms are often removed, and the system prepared to receive the good impressions of medicines. In most cases the loss of a considerable quantity of blood is indicated. After bleeding has been premised, it is

recommended by some to give an Emetic, by others a cathartic; but I think the most effectual practice, is to give an emetic and a cathartic in conjunction; for this purpose Tartar Emetic, combined with Glauber Salts, is an useful preparation. Its usual effects are the cleansing of the Prima Via, the removal of the spasms of the skin, and the production of a determination (of a determination) to the surface of the body. — But the more common practice is, after bleeding to give cathartics for the purpose of emptying the bowels. Castor oil, or Epsom Salts are generally resorted to, and the beneficial effects resulting from their exhibition, have been witnessed by many. More active purges are sometimes required. Calomel alone and worked off by Salts, or Vermicelli, or combined with Jalap appears to suit better. Tartar emetic, given in small doses and repeated at long intervals, is often effectual. When the above remedies fail to produce fecal evacuation, and the tormina and tenesmus are very distressing, a combination of Calomel and Opium, (or what I think better) a combination of Calomel and Dover's powder seems to

produce the desired effect of removing the faeces and at the same time to relieve the tormina and tenesmus.

When the febrile symptoms have been considerably reduced and the bowels freely evacuated. Opiates must be given for the three fold purpose of relieving pain and tenesmus, procuring sleep, and producing perspiration. I think their beneficial effects are promoted by the administration of the warm bath. They prove more serviceable when given at night. Great caution is necessary in using the bath, that the patient be not exposed to cold. The patient after having been in the bath, should be warmly covered in bed, and by the aid of warm diluent drinks a perspiration will generally break out, and with it an abatement of most of the symptoms, and he falls into a sound and refreshing sleep.

Calomel, Opium, and Ipecac in combination are medicines of great utility. Ipecac has been much extolled.

Dr Moseley concurs with Sydenham in considering dysentery a fever of the season, turned inwards upon the bowels, produced by a sudden suppression of perspiration

once after blood-letting "if necessary" and he recommends the evacuation of the bowels as a preparatory measure he places almost implicit reliance in such medicines as produce sweating. For this purpose, he recommends an emetic to be followed by antimonial sudorifics; of these he prefers "James's powder." Almost all authors concur with him in believing a determination to the surface necessary to the cure of this disease, and as to the measure which he adopts to produce this effect, few will object.

If to the above mentioned remedies the complaint do not yield, but the pain still continue to be great, and the abdomen sore and tumefied, a large blister should be applied to that part. Warm fomentations to the abdomen frequently relieve pain. Mild injections have been recommended to allay irritation and tenesmus. Professor Chapman of Philadelphia has used injections of fresh mutton butter with the most manifest service in allaying the above named symptoms.

I have spoken of the beneficial effects of calomel in dysentery. Tartar emetic in doses of three

or eight grains, combined with a grain of opium. Dr. Johnson believing this disease to be closely allied to Hepatitis, places the utmost confidence in calomel. He gave it either alone, or combined with the rhubarb, ipecac, or antimonial powder, and urges it to salivation as soon as practicable. This gentleman having been severely attacked by dysentery, and after other remedies had been administered without affording relief, he took a scruple dose of calomel, which produced such happy effects, that he was induced to have recourse to the same measures with some of his patients who were afterwards attacked by the same disease; and it was attended with almost universal success, in producing ptyalism, and relieving the symptoms. Emboldened by this, he afterwards prescribed calomel in scruple doses three or four times a day, which he says "almost universally eased the tenesmus and lessened the propensity to stool, and when the whole brought on ptyalism sooner than any other plan of smaller and more frequent doses." – A roller of flannel, lapped in healed around the abdomen from the hips to the thorax, is recommended.

When the disease advances in spite of our endeavours to arrest it, the sinking stage strength comes on. Here stimulants are demanded. Combinations of Opium and volatile alkali with wine, ether may be used. Oleum Terebinthina is highly recommended by the medical gentlemen of Prescott Chin; it may be given in doses of a tea spoonfull and repeated, in a matter, combined with volatile alkali.

Tenesmus generally prevails throughout the disease, but most often attends the close of it. Certain demands when in increased state of the rectum and together with the tumor adjacent to the pleura and cutaneous mixtures with Opium. Sacharum Saturni in doses of two, three grains with a quarter or half a grain of Opium is also very serviceable. But the injection of fresh melted butter which has been just mentioned, affords perhaps more relief than any other remedy. –

When the convalescence is slow and attended by an attack of Diarrhoea Opium with other astrin ents and mild tonics are of great service, [illegible] of

Gentian and columbo with Catechu and the extract of Hæmatoxylon campechianum or Logwood.

There is perhaps no disease in which regimen is of greater importance than it is in dysentery. The diet should consist of such food as is least irritating and most easily digested, as arrow root, tapioca, sago boiled rice and milk, mucilage of gum Arabic, flaxseed tea, barley water &c. avoiding all vegetables except those of the farinaceous kind. Malt liquors are inadmissible. The patient should be warmly clothed, wearing flannel next to the skin. He should avoid cold and wet. When there is great debility, may not a little brandy toddy be allowed?

Chronic Dysentery.

Dysentery sometimes degenerates into the chronic form. In this the bowels are tender and irritable, affected by small, griping, mucous passages, with a dry and parched skin, cannot concoct, and an diminution of appetite. The eyes are dark weak, and sunk in. There is most generally a great determination to the head.

Small bleedings and the administration of Dover's powders are recommended in this form of dysentery. Ipecac given in small doses and repeated several times in the course of the day, is an useful remedy in allaying irritation, and in producing a determination to the skin. Infusions of Columbo and Quassia and exercise on horseback give tone and strength to the system. The flannel roller is used here with decided advantage.. It supports the debilitated bowels, and keeps up an equable degree of warmth and perspiration of the parts to which it is applied. Calomel may be used in this form of dysentery.- When there is great debility, Nitric, or Nitro-Muriatic acid is of great service, and may be given to the extent of one, or two drachms in the course of the day. These acids, greatly diluted with water, have been used as a bath. An ounce consisting of equal parts of these acids, is sufficient to acidulate a gallon of water; the bath should be moderately warm. —

Cleghorn gave opium once, or twice a day in this form of dysentery.

Typhoid Dysentery.

This form of dysentery has been very little noticed. It occurs in hospitals, camps, prison ships, and other crowded places. Its characteristic symptoms are a feble pulse, dejected countenance, a foul dark tongue, and a sallow complexion.

The treatment of this, differs materially from that of every other form of dysentery. Here the early exhibition of emetics is indicated, to be succeeded by the use of diaphoretics and diffusible stimulants, as opium, wine whey, volatile alkali, Camphor, and blisters. The liberal use of Oleum Terebinthina is recommended; but our chief dependance is to be placed in Mercury, and it is best to recur to it at once. Calomel should be given internally, and mercurial Ointment applied externally, in such a manner as to produce a speedy salivation.

Intermittent Dysentery.

Dysentery sometimes assumes an intermittent char-

acter, there being regular exacerbations of fever and gripes every day, or every other day, at stated periods.

Here Cleghorn recommends Bark to be given. It is very well known that bark, especially when given in substance produces great irritation in the intestines when they are in a state of inflammation, it must therefore be injurious and inadmissible in dysentery.

The experience of Professor Chapman authorises us to disregard the intermittent fever entirely until the bowel affection is removed; and then to apply the medicines appropriate for the cure of such fever.